

**APPLICATION NUMBER**

<input type="checkbox"/>	Rejected	-	(Through Numerical) Cancelled	N	Non-Elected	A	Appeal
<input checked="" type="checkbox"/>	Allowed	+	Restricted	I	Interference	O	Objected

Claim	Date
Final	Original
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here